

APPENDIX BB

FILE FORMAT FOR THE REPORTING OF NURSING HOME FACILITY ENCOUNTERS IN THE TEXAS STAR+PLUS PROGRAM

File Format for the Reporting of Nursing Home Facility Encounters in the Texas Star+Plus Program

PURPOSE:

This file is used to report long term care encounter data that can not be reported on the HCFA 1500. At this time primarily to report Nursing Facility or sub-acute days and payment, other items may be added.

Description	Size	Type	Comments
Plan code	2	Numeric	Assigned Code per HMO
Plan Claim #	12	Alphanumeric	HMO's internal assigned number
Record #	2	Numeric	Record counter per claim
Medicaid #	9	Numeric	Client's number assigned by TDHS eligibility
Provider #	9	Alphanumeric	Assigned TDHS # left justified, zero fill
Record Type	1	Alphanumeric	V=void; A=adjustment; P=paid
DOS From	8	Date	MMDDYYYY
DOS Thru	8	Date	MMDDYYYY
Revenue Code	3	Numeric	072, 073, 074, 075, 185
Dollars Paid	8(2)	Numeric	999999.99 (decimal implied, not formatted)

Additional revenue codes may be added. Descriptions of revenue codes will be added.